

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 148 OF 152
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Nurses United for Patient Protection		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00490375 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on			
Full Name of Payee Outfront Media		<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 04 / 04 / 2016</div> </div>	
Mailing Address 185 US Highway 46		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">243.75</div>	
City Fairfield	State NJ	Zip Code 07004	Transaction ID : D711377 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 03 / 24 / 2016</div> </div>
Purpose of Expenditure Print Advertising		Category/Type	
Name of Federal Candidate Bernie Sanders		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">372762.50</div>			
Full Name of Payee California Nurses Association		<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 03 / 24 / 2016</div> </div>	
Mailing Address 155 Grand Avenue		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">100.00</div>	
City Oakland	State CA	Zip Code 94612	Transaction ID : D711393 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 03 / 24 / 2016</div> </div>
Purpose of Expenditure Online Ad		Category/Type	
Name of Federal Candidate Bernie Sanders		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: DC	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">757143.91</div>			
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		<div style="border: 1px solid black; padding: 2px; display: inline-block;">343.75</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures..... ▶		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature Martha Kuhl		Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 06 / 08 / 2016</div> </div>	

[Electronically Filed]